



S.N.S. INSTITUTE OF NURSING SCIENCE

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Recognised by- Health Department, Government of Bihar & B.N.R.C., Patna

Affiliated to- Bihar University of Health Sciences (BUHS), Patna

as per Guidelines issued vide F. No.- 1-6/2018 of Indian Nursing Council, Govt. of India, New Delhi

Date :

BONAFIDE LETTER

This is to certify that _____, S/D/o- _____,

Vill- _____, PO- _____,

PS- _____, DIST- _____, Pin

Code- _____ Bihar Student ID (Student Admission No)-

_____, Roll No. _____ is a bonafide student of S.N.S.

Institute of Nursing Science, Course _____ Session

_____. Duration of the course is _____ Years.

His / Her Date of Birth as per the college record is ____/____/____

Place:-

Date:-

Principal